A RE-AUDIT OF THE URODYNAMIC SERVICE. A UK DISTRICT GENERAL HOSPITAL EXPERIENCE.

Hypothesis / aims of study
This is a re-audit of urodynamic service provision and does not address clinical concerns which would be associated with urodynamic investigation.

Urodynamic service was introduced in our unit in December 2003. An average of 140 UDA are performed annually. In 2004, a service provision audit took place. The audit showed that it failed to reach a set standard. Areas of concern were inadequate explanation of the procedures and inadequate facilities.

The audit recommended that leaflets about the Urodynamic procedures had to be provided for the patients and that directions to the Urodynamic clinic were to be included in the patients’ letter. In addition to that the facilities needed to be brought up to the required standard.

Based on the recommendations of the audit, some changes have taken place, such as the relocation of the clinic to a better equipped area in the hospital.

In 2008 a re-audit was carried out to investigate whether the recommendations of the previous audit had been implemented and whether patient satisfaction had improved.

Study design, materials and methods
A total of 107 female patients were included in the present study. 52 patients were included in the first audit and 55 in the second one. The questionnaire was given to the patients immediately following the urodynamic investigation. It contained questions about patients anxiety prior to the investigation as well as pain and embarrassment perceived by the patients during the procedure (assessed in visual analogue scale on which 0 = not at all, 10 = intolerable). In addition, the patients were asked to give their opinion about the facilities. They were also questioned on whether clear directions to the clinic had been given and on whether they had received adequate information about the nature and the course of the investigation. They were also asked whether they were made aware of investigation result and whether a date had been set for a follow up.

The agreed audit standards were as follows: 95% satisfaction with facilities, Patient should be informed of the procedure in more than 95% of cases; written information should be clear and easily understood; patients should be aware of investigation result and a follow up should be prior to leaving clinic.

The data was analysed and compared to that of the previous audit.

Results
The mean degree of anxiety experienced by the patients was 4.9 (+/- 2.9 SD). The degree of pain was 2.8 (+/- 2.4 SD) and the degree of embarrassment was 2.1 (+/- 2.8 SD) The presence of male or female doctor during the test made no effect on the degree of embarrassment.

53% of the patients received written information about the test and 80% were satisfied with the explanation they received prior to the test.

The satisfaction about the facility increased to 100%.

Interpretation of results
Implementation of the recommendation of the previous audit and the move to the new premises has significantly improved the patients’ satisfaction.

Our results were comparable to those of other published audits except for the anxiety level, which was higher. The main reason was the fear of the unknown and embarrassment. Increased compliance regarding explanation of the procedure and written information about the test would have reduced the anxiety.

Concluding message
Our results showed that Urodynamic study is acceptable and well tolerated by the patients. Explanation before and during the test improves patient acceptance and satisfaction. It also highlights the importance of audit in improving the quality of medical care and patient satisfaction.

Specify source of funding or grant  None
Is this a clinical trial?  No
What were the subjects in the study?  HUMAN
Was this study approved by an ethics committee?  No
This study did not require ethics committee approval because  It was not required
Was the Declaration of Helsinki followed?  Yes
Was informed consent obtained from the patients?  Yes